



Department of Medical Informatics and
Clinical Epidemiology
3181 S.W. Sam Jackson Park Road
Portland, OR 97239-3098
tel 503 494-4502
fax 503 494-4551

Capstone/Internship Project Agreement

The *Project Agreement* and *Project Plan* draft should be *typed, signed* on page 2, and submitted to the OHSU Internship Coordinator no later than the midterm of the quarter prior to the Capstone/Internship.

Please attach the Project Plan draft to a copy of this contract.

Student Name: Date:

Location (City, State):

Phone:

Email address:

OHSU Faculty Advisor: Capstone/Internship Start Term:

Sponsoring Organization Name:

Sponsor/Mentor Name:

Title:

Address:

Phone:

Email Address:

Project Plan attached:

- Submit to Internship Coordinator **4 weeks prior** to start of Capstone/Internship

Capstone/Internship Project Plan (to be attached) - Please address the following in 2-3 double spaced pages:

- 1) Overall description of planned involvement
- 2) Specific objectives to be accomplished
- 3) List of activities required of student (indicate deadline after each item)
- 4) Deliverables (a training manual, research summary, etc.) and metrics for assessment
- 5) Description of how your education, experience, and interests align with the proposed project
- 6) Description of how the proposed project relates to your job role (if applicable)
- 7) Frequency of meetings with Sponsoring Organization mentor
- 8) Frequency of other meetings with other Sponsoring Organization staff (if applicable)
- 9) Any additional requirements the Sponsoring Organization or Faculty Advisor may have for the student

Please check each box below to acknowledge awareness of the Capstone/Internship requirements:

- I will meet with my sponsor/mentor according to the schedule listed in the Project Plan.
- I will complete three evaluations about Capstone/Internship progress, using the online tool.
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- I will write a 10-15 page report to be submitted to the Faculty Advisor and Internship Coordinator no later than **one week prior** to the end of the second quarter of my Capstone/Internship.
- Along with the report, I will submit a log of hours kept and project plan activities to the Faculty Advisor and Internship Coordinator no later than one week prior to the end of the quarter of my internship.
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Paperwork required to initiate the Capstone/Internship:

- Interest Form
- Project Agreement
- Project Plan (Send to Internship Coordinator, who will forward to Faculty Advisor for review and approval.)
- SOM Grad Studies Master’s Mentor/Advisor Assignment Form: <https://www.ohsu.edu/school-of-medicine/graduate-studies/forms-and-policies>. Click on “Student Forms” to see the list of forms.

Your signature below indicates that you have read and agree to abide by all of the processes and role responsibilities as outlined in the OHSU Capstone/Internship.

Student Signature _____ Date _____

Sponsor Signature _____ Date _____

Faculty Advisor Signature _____ Date _____

Internship Coordinator Signature _____ Date _____